

Name: _____

Date: _____

MediCare

F U T B C O M P A S S I O N A T E T R A V E L P
 A E M E R G E N C Y A I R A M B U L A N C E V R
 Y F I R S T Y E A R V A C C I N A T I O N S G O
 U P H I D J Q V A Y Y V C V P E B K U D O H T L
 S O R N X E W Q D S H M O H R V A M R O P G B O
 H S E P O V R P A Y Z G N I E A C A W M D C I N
 Z T S A R D O D Y J H V S G H C C T S I F C N G
 L H T T G E O A C K E T U H O C I E B C S A P E
 P O O I A N M I A G A Z M E S I D R A I E N A D
 A S R E N U R L R G L C A N P N E N R L C E T H
 S P E N D W E Y E L T L B D I A N I I I O W I O
 K I B T O I N C P O H V L D T T T T A A N B E S
 P T E T N V T A R B C R E I A I A Y T R D O N P
 N A N R O O F S O A H D S A L O L C R Y O R T I
 E L E E R U I H C L E S B G I N D O I T P N D T
 J I F A G L K B E C C O E N Z C E V C R I K E A
 I Z I T G V K P D O K A N O A O A E S E N F N L
 S A T M N G H B U V U Z E S T V T R U A I L T I
 M T G E M R H H R E P R F T I E H Q R T O H A Z
 C I J N W W F I E R Z F I I O R D R G M N H L A
 W O H T T G T L S P I K T C N U S K E E Z F M T
 Y N K C U M U L A T I V E B O N U S R N P M S I
 L M P Z U K I M H E A R I N G A I D Y T O W R O
 Q F H V E W A M B U L A N C E C O V E R W N H N

Prolonged Hospitalization
 Compassionate Travel
 Posthospitalization
 Bariatric Surgery
 Maternity Cover
 Second Opinion
 Daily Cash
 OPD

Emergency Air Ambulance
 In patient Treatment
 daycare procedures
 Vaccination Cover
 Ambulance Cover
 Global Cover
 Room Rent

First year Vaccinations
 High End Diagnostic
 Prehospitalization
 Cumulative Bonus
 Restore Benefit
 Hearing Aid
 New Born

Domiciliary Treatment
 Consumables Benefit
 In-patient Dental
 Accidental Death
 Health Checkup
 organ donor
 AYUSH